

CLASS 3B & 4 LASER USE REQUEST/AUTHORIZATION					
Responsible Person	Responsible Person Signature	Phone #	Organization Code	Building/Room	Date

[illegible]

**II. DESCRIPTION/DURATION OF INTENDED USE**

1. Use Location (Area, Building, Room)	2. Description Of Intended Use	3. Proposed Period Of Use

### III. PROCEDURES

1. List all operating/alignment procedures, or attach if necessary.
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#### IV. SYSTEM USERS

1. Attach list of all system user/operators. Assure that each person listed has had an initial Laser Eye Exam and is certified Per MWI 3410.1.

V. LASER SAFETY REQUIREMENTS	
VI. APPROVAL	
Laser Safety Officer	Date

INSTRUCTIONS
<p><b>Section I – Laser Description(s)</b></p> <p>For each device indicate (as applicable):</p> <ol style="list-style-type: none"><li>1. Type of laser: Laser medium (HeNe, Nd: YAG, etc.)</li><li>2. Use location: The building and room where the laser can be found in use or in storage</li><li>3. Manufacturer of laser</li><li>4. Manufacturer's model number for laser</li><li>5. Manufacturer's serial number for laser</li><li>6. MSFC property or ECN number (if applicable)</li><li>7. Peak power: The maximum output of laser (W for CW, J for pulsed)</li><li>8. ANSI Class of laser (ANSI Z136.1)</li><li>9. Wavelength: Enter in nanometers. If laser is capable of multiple wavelengths, list the ones that are intended to be used, and the term “various”</li><li>10. Beam shape: Circular, elliptical, rectangular, square, etc.</li><li>11. Gaussian beam criteria: 1/e or 1/e2 (usually stated by manufacturer)</li><li>12. Beam diameter: Diameter of beam at 1/e or 1/e2 power point, in cm (usually stated by manufacturer)</li><li>13. Beam divergence: Beam divergence at 1/e or 1/e2 power point, in radians</li><li>14. Operating mode: Continuous wave (CW), pulsed, or scanned</li><li>15. Pulse length: Pulsed lasers only, indicate pulse duration in seconds</li><li>16. Pulse Repetition Frequency (PRF): Pulsed lasers only, indicate PRF in Hz</li><li>17. Single or multimode: Fiber optic lasers only, from manufacturer</li><li>18. Mode field diameter: For single-mode fiber optic lasers, usually indicated by manufacturer</li><li>19. Numerical aperture: For multimode fiber optic lasers, usually indicated by manufacturer</li><li>20. Optical density (OD) for protective eyewear: This value will be specified by the Laser Safety Officer (LSO) upon submittal of this form. The specified OD for each laser shall be the minimum value used when selecting laser protective eyewear for open beam viewing.</li></ol> <p><b>Section II – Description/Duration of Intended Use</b></p> <ol style="list-style-type: none"><li>1. Description of intended use: Brief description of what each laser is to be used for</li><li>2. Proposed period of use: Maximum period is one year with annual renewals<ol style="list-style-type: none"><li>a. Must renew this form when a new laser is added or when a change is made to any data element in Section 1. Please notify the Laser Safety Officer at 256-544-5382 if you have any questions.</li></ol></li></ol> <p><b>Section III – Procedures</b></p> <ol style="list-style-type: none"><li>1. List all operating/alignment procedures: For those not available through the MSFC Integrated Library, please provide a copy.</li></ol> <p><b>Section IV – System Users</b></p> <ol style="list-style-type: none"><li>1. List all personnel who will be using/operating the laser on a separate sheet and attach it to the first page of the Form. All personnel using/operating lasers are required to have an initial laser eye exam, laser training (SHE 216), and be certified per MWI 3410.1 PRIOR to starting work with lasers.</li></ol> <p><b>Sections V and VI – LSO Use Only</b></p>